

Effective on 12/08/2004.
Fees pursuant to the Consolidated Appropriations Act, 2005 (P.L. 108-187)

JAN 09 2006

**FEES TRANSMITTAL
for FY 2005**

JAN 09 2006

 Applicant claims small entity status. See 37 CFR 1.27**TOTAL AMOUNT OF PAYMENT**(\$)**1058**

TRADEMARKS

Attorney Docket No. 480062.730C1

METHOD OF PAYMENT (check all that apply) Check Credit Card Money Order Other (please identify): _____ Deposit Account Deposit Account Number: 19-1090 Deposit Account Name: Seed IP Law Group PLLC

For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)

- Charge fee(s) indicated below Charge fee(s) indicated below, except for the filing fee
 Charge any additional fee(s) or underpayments Charge any underpayments or credit any overpayments
of fee(s) under 37 CFR 1.16 and 1.17

Warning: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.

FEE CALCULATION**1. BASIC FILING, SEARCH, AND EXAMINATION FEES**

	FILING FEES		SEARCH FEES		EXAMINATION FEES		
	<u>Small Entity</u>		<u>Small Entity</u>		<u>Small Entity</u>		
<u>Application Type</u>	<u>Fee (\$)</u>	<u>Fee (\$)</u>	<u>Fee (\$)</u>	<u>Fee (\$)</u>	<u>Fee (\$)</u>	<u>Fee (\$)</u>	<u>Fees Paid (\$)</u>
Utility	300	150	500	250	200	100	_____
Design	200	100	100	50	130	65	_____
Provisional	200	100	0	0	0	0	_____

<u>Total Claims</u>	<u>Extra Claims</u>	<u>Fee (\$)</u>	<u>Fee Paid (\$)</u>	<u>Multiple Dependent Claims</u>	
				<u>Fee (\$)</u>	<u>Fee Paid (\$)</u>
_____	-20 or HP = _____	X _____	= _____	_____	_____

HP = highest number of total claims paid for, if greater than 20

<u>Indep. Claims</u>	<u>Extra Claims</u>	<u>Fee (\$)</u>	<u>Fee Paid (\$)</u>
6	-3 or HP = 3	X 200	= 600

HP = highest number of independent claims paid for, if greater than 3

3. APPLICATION SIZE FEE

If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)) the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

<u>Total Sheets</u>	<u>Extra Sheets</u>	<u>Number of each additional 50 or fraction thereof</u>	<u>Fee (\$)</u>	<u>Fee Paid (\$)</u>
_____	-100 = _____	/50 = _____ (round up to a whole number)	x _____	_____

4. OTHER FEE(S)

Non-English Specification, \$130 fee (no small entity discount) _____

Other (e.g., late filing surcharge): Petition for Extension of Time (2 months) _____**SUBMITTED BY**

Signature		Registration No. (Attorney/Agent)	45,866	Telephone	206-622-4900
Name (Print/Type)	Raymond W. Armentrout		Date	January 9, 2006	



01-10-06

EXPRESS MAIL NO. EV529789787US

ZWAF-

PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a)		Docket Number 480062.730C1																																	
FY 2005 (Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).)																																			
Application Number 10/800,954	Filed March 15, 2004																																		
For OPTOELECTRONIC DEVICE AND PROCESS FOR ACQUIRING SYMBOLS, SUCH AS BAR CODES, USING A TWO-DIMENSIONAL SENSOR																																			
Art Unit 2876	Examiner Jamara A. Franklin																																		
<p>This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application.</p> <p>The requested extension and fee are as follows (check time period desired and enter the appropriate fee below):</p> <table> <thead> <tr> <th></th> <th><u>Fee</u></th> <th><u>Small Entity Fee</u></th> </tr> </thead> <tbody> <tr> <td><input type="checkbox"/> One month (37 CFR 1.17(a)(1))</td> <td>\$120</td> <td>\$60</td> </tr> <tr> <td><input checked="" type="checkbox"/> Two months (37 CFR 1.17(a)(2))</td> <td>\$450</td> <td>\$225</td> </tr> <tr> <td><input type="checkbox"/> Three months (37 CFR 1.17(a)(3))</td> <td>\$1020</td> <td>\$510</td> </tr> <tr> <td><input type="checkbox"/> Four months (37 CFR 1.17(a)(4))</td> <td>\$1590</td> <td>\$795</td> </tr> <tr> <td><input type="checkbox"/> Five months (37 CFR 1.17(a)(5))</td> <td>\$2160</td> <td>\$1080</td> </tr> <tr> <td> <input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27.</td> <td></td> <td></td> </tr> <tr> <td><input checked="" type="checkbox"/> A check in the amount of the fee is enclosed.</td> <td></td> <td></td> </tr> <tr> <td><input type="checkbox"/> Payment by credit card. Form PTO-2038 is attached.</td> <td></td> <td></td> </tr> <tr> <td><input type="checkbox"/> The Director has already been authorized to charge fees in this application to a Deposit Account.</td> <td></td> <td></td> </tr> <tr> <td><input type="checkbox"/> The Director is hereby authorized to charge any fees which may be required or credit any overpayment, to Deposit Account Number <u>19-1090</u>. I have enclosed a duplicate copy of this sheet.</td> <td></td> <td></td> </tr> </tbody> </table> <p>WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.</p> <p>I am the <input type="checkbox"/> applicant/inventor.</p> <p><input type="checkbox"/> assignee of record of the entire interest. See 37 CFR 3.71 Statement under 37 CFR 3.73(b) is enclosed (Form PTO/SB/96).</p> <p><input checked="" type="checkbox"/> attorney or agent of record. Registration No. <u>45,866</u></p> <p><input type="checkbox"/> attorney or agent under 37 CFR 1.34. Registration number if acting under 37 CFR 1.34. _____.</p>				<u>Fee</u>	<u>Small Entity Fee</u>	<input type="checkbox"/> One month (37 CFR 1.17(a)(1))	\$120	\$60	<input checked="" type="checkbox"/> Two months (37 CFR 1.17(a)(2))	\$450	\$225	<input type="checkbox"/> Three months (37 CFR 1.17(a)(3))	\$1020	\$510	<input type="checkbox"/> Four months (37 CFR 1.17(a)(4))	\$1590	\$795	<input type="checkbox"/> Five months (37 CFR 1.17(a)(5))	\$2160	\$1080	 <input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27.			<input checked="" type="checkbox"/> A check in the amount of the fee is enclosed.			<input type="checkbox"/> Payment by credit card. Form PTO-2038 is attached.			<input type="checkbox"/> The Director has already been authorized to charge fees in this application to a Deposit Account.			<input type="checkbox"/> The Director is hereby authorized to charge any fees which may be required or credit any overpayment, to Deposit Account Number <u>19-1090</u> . I have enclosed a duplicate copy of this sheet.		
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<u>Raymond W. Armentrout</u>		January 9, 2006																																	
Signature		Date																																	
Raymond W. Armentrout		206-622-4900																																	
Typed or printed name		Telephone Number																																	
<p>NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required.</p>																																			

SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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